Discussing Family Planning

1. Basic Info from MIHP Maternal Educational Brochure

Family Planning

What is family planning?

- Family planning means using birth control to space your pregnancies.
- It's best to wait at least 18 months after giving birth before getting pregnant again.
- There are many different methods of birth control (the pill, patch, shot, sponge, condom, etc.).
- You can choose the method that's best for you.

Why should I use family planning to space my pregnancies?

- It's better for your health.
- It's better for your baby's health.
- It's less stressful for you when pregnancies aren't too close together.

Where can I get family planning services?

- Your doctor's office.
- Planned Parenthood.
- Your local health department.

How can I afford family planning services?

- Family planning is covered by Medicaid.
- If you are not on Medicaid, your costs may be covered by another state program called "Plan First!"

Where can I get more information about family planning?

- Your MIHP worker.
- Your local health department.
- Online at

http://www.fda.gov/downloads/ForConsumers/ByAudience/ForWomen/FreePublications/UCM207070.pdf (to print)

http://www.fda.gov/ForConsumers/ByAudience/ForWomen/FreePublications/ucm116 718.htm (to order)

You can use a computer for free at your local library. The librarian will help you.

Remember:

- Use family planning to space your pregnancies.
- Wait at least 18 months after giving birth before getting pregnant again.

Interconception Health

What is interconception health?

Interconception is the time between pregnancies.

- Use this time to make sure you are healthy.
- This is especially important if you ever had a:
 - Baby with low-birthweight or health problems
 - Miscarriage
 - Stillbirth

What can I do to improve my health so my next baby will be as healthy as possible?

- Your doctor can look at your risks and help you get the care you need before you get pregnant again. This will give you the best chance to stay healthy yourself and deliver a healthy baby.
- It's important to:
 - Keep your interconception care appointments.
 - Follow your doctor's recommendations.

What does interconception care include?

- Family planning services. (Wait at least <u>18 months</u> after giving birth to get pregnant again.)
- Updating vaccinations.
- Treating infections.
- Controlling chronic conditions, such as asthma, hypertension, and diabetes.
- Limiting contact with toxic substances, such as lead, mercury and pesticides.
- Counseling and support:
 - To eat right and take folic acid.
 - To gain or lose weight.
 - To get more exercise.
 - To guit smoking.
 - To avoid secondhand smoke.
 - · For possible genetic risks.
 - For alcohol problems.
 - For drug problems.
 - For depression, anxiety or stress.
 - For domestic violence.

Remember:

- It's not enough to take special care of yourself when you're pregnant. Taking care of yourself between pregnancies is just as important.
- Wait at least 18 months after giving birth to get pregnant again.
- Use the time between pregnancies to make sure your next baby is as healthy as possible.
- Your doctor will look at your health risks and help you get the interconception care that you need.
- Keep all of your doctor's appointments and follow your doctor's recommendations.

2. Birth Control Guide - FDA Office of Women's Health

All MIHP staff should have this guide with them at all professional visits, in case they need to refer to it. Download and print it or request 50 free copies at a time.

http://www.fda.gov/downloads/ForConsumers/ByAudience/ForWomen/FreePublications/UCM207070.pdf (to print)

http://www.fda.gov/ForConsumers/ByAudience/ForWomen/FreePublications/ucm

116718.htm (to order)

3. Bringing Up Family Planning at Every Visit

Medicaid policy requires MIHP professionals to raise the issue of family planning at every visit, even if a woman has already identified the birth control method she intends to use after her baby is born. Medicaid requires this because:

- Spacing pregnancies at least 18 months apart is best for maternal and child health.
- Reducing unintended pregnancies is a critical strategy in reducing infant mortality and morbidity.
- We want to do all we possibly can to assist a woman to implement her birth control plan because she may face barriers to following through with it.

Below are some possible statements you could use (or adapt) during follow-up visits:

- A. It may seem strange to keep talking about family planning while you're pregnant, but it's **so** important for your health and your baby's health.
- B. **All** MIHP workers are required to ask **all** women about family planning every time we visit. This is because:
 - You and your future babies will be healthier if you wait at least 18 months before you get pregnant again.
 - It's hard on you and your baby if you have an unintended pregnancy.
- C. If you have an unintended pregnancy, your baby is more likely to:
 - Have poorer physical health during childhood
 - Have poorer mental health during childhood
 - Have school problems
 - Have behavior problems

The Consequences of Unintended Childbearing. (May 2007). Child Trends, Inc. Unintended Pregnancy.pub

- D. If you have an unintended pregnancy:
 - You're more likely to experience physical violence during pregnancy.
 - · Your relationship with your partner is more likely to end.
 - It's more likely your mother-child relationship won't be as close.
 - You're more likely to have mental health problems

The Consequences of Unintended Childbearing. (May 2007). Child Trends, Inc. Unintended Pregnancy.pub

- E. In Michigan [select the most relevant bullet(s) below]:
 - Two out of every five women who give birth didn't plan to get pregnant.
 - Three out of every five black (non-Hispanic) women who give birth didn't plan to get pregnant.
 - At least three-fourths of teen pregnancies are unintended.
 - Nearly half of women who had an unintended pregnancy reported not using a contraceptive method.

(Michigan 2010 Critical Health Indicators)

Why don't more women use birth control if they don't want to get pregnant?

4. Some Questions to Ask about Woman's Birth Control Plan

- A. Looks like you **decided not to use birth control** after your baby is born. Could you tell me about the reasons for your decision? NOTE: Reasons may include the following:
 - Too confusing to pick a birth control method.
 - · Concerned about side effects.
 - Didn't work in the past.
 - Can't afford it.
 - It's just one more thing to have to worry about and take care of when I'm already overwhelmed.
 - Against my religion.
 - Partner doesn't want me to use birth control.
 - Other

What would have to happen for you to your change mind and decide to use birth control to space your pregnancies?

Remember that if you do change your mind, MIHP will be glad to help you get the family planning services that you need, after your baby is born

- B. Looks like **you're thinking about using** _____ as your birth control method after you baby is born.
 - Are you still thinking this is the method you want to use?
 - What questions do you have about this method?
 - Would you like information on any other methods?
 - Remember that after your baby is born, MIHP will be glad to help you get the family planning services that you need.
- C. Looks like **you've decided to use** _____ as your birth control method after your baby is born.
 - Is that still your plan?
 - What questions do you have about this method?
 - What things could come up that would keep you from using this method?
 - Remember that after your baby is born, MIHP will be glad to help you get the family planning services that you need.

5. Motivational Interviewing

Motivational interviewing skills are an important tool when talking with women about family planning. DCH has posted six motivational interviewing online training modules at the MIHP web site at www.michigan.gov/mihp. All MIHP professionals are required to view the first module; however, it is strongly recommended that all staff view the other five modules as well.